



**COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER**

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January 16, 2008

TO: Supervisor Yvonne B. Burke, Chair
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: J. Tyler McCauley 
Auditor-Controller

SUBJECT: **DEPARTMENT OF JUSTICE SETTLEMENT AGREEMENT –
NOVEMBER 2007 MONITORING RESULTS**

As requested, attached are the results of the Auditor-Controller (A-C) monitoring review of the County's juvenile halls for November 2007. The monitoring reviews are used to measure Los Angeles County's (County) progress in implementing the 56 recommendations (referred to as paragraphs) contained in the Department of Justice (DOJ) settlement agreement. The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the DOJ Project monitors (Monitors).

Background

In December 2004, the A-C assumed oversight responsibility of the Quality Assurance Unit (QA Unit) as directed by your Board. The QA Unit was established to conduct on-going monitoring of the County's progress implementing the paragraphs contained in the DOJ settlement agreement. The QA Unit works and consults with the Monitors regularly. The Monitors are a group of subject matter experts designated by the DOJ, the County and Los Angeles County Office of Education (LACOE) to assess the County and LACOE's progress to implement the paragraphs contained in the settlement agreement.

LACOE has been designated as the lead agency for nine of the 56 paragraphs and monitors their own progress implementing these paragraphs. LACOE reports are submitted to the A-C and Monitors monthly. The status of each of LACOE's paragraphs begins on page 12 of Attachment 2 of this report.

"To Enrich Lives Through Effective and Caring Service"

Implementation Status Summary

As of December 2007, 21 of the 56 paragraphs are in full compliance. On November 19, 2007, the DOJ initiated formal monitoring for Paragraphs 41 (Medical Records Transfer) and 46.1 (Special Education Upon Intake). Since January 2007, the DOJ began formal monitoring on a total of 11 paragraphs (10, 18, 22, 23, 24, 41, 45, 46.1, 52, 53, and 54).

For eight of the remaining 24 paragraphs, LACOE staff monitors the implementation status. For the remaining 16 paragraphs:

- 7 paragraphs showed a 90% or above compliance rate.
- 6 paragraphs showed an 80% to 89% compliance rate.
- 2 paragraphs showed a 70% to 79% compliance rate.
- 1 paragraph showed a less than 70% compliance rate.

Overall, the compliance rates for the 16 paragraphs have not changed significantly since our October 2007 review.

Attachment 1 contains a summary of the status of the 16 paragraphs not in formal monitoring. The details of our November 2007 monitoring review for the 16 paragraphs and the compliance rate for each are addressed in Attachment 2. Beginning next month, unless otherwise directed, our monthly status reports to the Board will only include Attachment 1. We will continue to share our assessment and specific findings of the outstanding paragraphs with the affected departments.

If you have any questions, please contact me or have your staff call Don Chadwick at (626) 293-1102.

Attachments

JTM:MO:DC

c: William T Fujioka, Chief Executive Officer
Robert B. Taylor, Chief Probation Officer
Sachi A. Hamai, Executive Officer, Board of Supervisors
Dr. Bruce Chernof, Director, Department of Health Services
Dr. Marvin J. Southard, Director, Department of Mental Health
Patricia S. Ploehn, Director, Department of Children and Family Services
Dr. Darline P. Robles, Superintendent, Los Angeles County Office of Education
Justice Deputies
Children Services Deputies
Education Deputies
Audit Committee

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT SUMMARY OF MONITORING RESULTS

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT AUDIT RESULTS		AUG 07	SEPT 07	OCT 07	NOV 07	SUBSTANTIAL COMPLIANCE (1)
Paragraph 11	Treatment Planning	80%	80%	76%	78%	80%
Paragraph 12	Implementation of the Treatment Plan	63%	68%	65%	67%	85%
Paragraph 13 A	Counseling Services	59%	65%	73%	65%	80% (2)
Paragraph 13 B	Counseling Services	61%	67%	54%	73%	50% (2)
Paragraph 15	Individual Behavior Modification	90%	95%	95%	95%	(3)
Paragraph 16	Substance Abuse	70%	70%	70%	80%	Implementation of Contract Service Providers
Paragraph 25	Management of Suicidal Youth	90%	95%	95%	97%	(3)
Paragraph 26	Care for Self-Harming Youth	90%	95%	95%	95%	90%
Paragraph 27	Staffing	80%	80%	80%	80%	(3)
Paragraph 28	Chemical Restraint	87%	90%	90%	95%	90%
Paragraph 29	Use of Force	95%	95%	95%	95%	95% at all three halls
Paragraph 31	Child Abuse Investigations	75%	80%	80%	85%	DOJ has not set a substantial compliance level
Paragraph 32	Use of Force Review	87%	90%	90%	93%	90%
Paragraph 33	Rehabilitation and Behavior Mgmt	90%	95%	95%	95%	(3)
Paragraph 35	Reduction of Youth on Youth Violence	80%	85%	85%	85%	(3)
Paragraph 46-50	LACOE	n/a	n/a	n/a	n/a	(4)
Paragraph 55	Youth Hygiene	75%	80%	80%	80%	75%
Paragraph 56	System	85%	85%	85%	85%	100%

Footnotes:

- (1) Substantial compliance is the level of compliance set by DOJ that the County must achieve for the paragraph to be granted formal monitoring. There must be a commensurate level of compliance at all three halls.
- (2) Paragraph 13-A measures the adequacy of treatment; Paragraph 13-B measures improvement in the client's condition.
- (3) These paragraphs do not have an actual set percentage of substantial compliance. DOJ is monitoring these paragraphs by monitoring and observing the environmental change brought about by the reduction of use of force, reduction of youth on youth violence, appropriate management of suicidal youth and an environment free of fear and intimidation.
- (4) Paragraphs 46-50 are monitored by LACOE and are outside the scope of this report. In August 2007, the Memorandum of Agreement between the County, LACOE and the DOJ was amended to expand Paragraph 46 into five separate paragraphs (46.1, 46.2, 46.3, 46.4, and 46.5) to more easily track the progress by LACOE to implement the paragraph. LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs. LACOE management stated they have been working closely with the Monitors and have reached a mutual understanding of the definition of substantial compliance. The Monitors will provide details of LACOE's progress toward substantial compliance in their upcoming semi-annual report.

**QUALITY ASSURANCE UNIT
MONTHLY MONITORING RESULTS
FOR NOVEMBER 2007**

Scope of Review

The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the Department of Justice (DOJ). Pursuant to the August 22, 2007, First Amendment to Memorandum of Agreement between the County of Los Angeles, LACOE and the DOJ, Paragraph 46 has been amended into five paragraphs to more easily track the progress to implement the paragraph. The amendment increases the number of paragraphs from 52 to 56.

In August 2007, Paragraph 44 (Eyeglasses) was granted full compliance bringing the total number of paragraphs in full compliance to 21 of the 56 paragraphs. On November 19, 2007, the DOJ also began formal monitoring for Paragraphs 41 (Medical Records Transfer) and 46.1 (Special Education Upon Intake). Since January 2007, the DOJ began formal monitoring on a total of 11 paragraphs (10, 18, 22, 23, 24, 41, 45, 46.1, 52, 53, and 54).

For eight of the remaining 24 paragraphs, LACOE staff monitor the implementation status. Our monitoring review covered the remaining 16 paragraphs. The compliance rate that we established for each paragraph is based on our testwork, discussions with the Monitors and the compliance rates for the overlapping paragraphs.

PARAGRAPH 11: Treatment Planning

The County shall develop and implement policies and procedures, and practices for interdisciplinary treatment planning for youth with serious mental health needs, which allow for the ongoing identification, goal setting, and monitoring of youths' target symptoms. As permitted by law, a representative of LACOE shall share information with regard to the youth's academic performance and school-related behaviors, and shall also be responsible for sharing needed information from the treatment planning process with education professionals serving those youth.

Current Compliance Rate: 78%

Comments:

Based on the documentation maintained by Probation staff, it appeared that the Department of Mental Health (DMH) provided services to the minors. DMH utilizes the Service Recommendation Section of the Assessment to capture the preliminary treatment plan. Based on our review of the case files, the treatment plan is often vague. In addition, the interventions are too general. They focus primarily on the minor's adjustment to the facility. These findings have been noted in prior monitoring reviews and discussed with DMH management. DMH management met with their clinicians and contracted agencies' executive directors to reinforce the need for staff to maintain documentation to support treatment plans and services provided.

The Individualized Behavior Modification Planning (IBMP) process is well-established and smoothly functioning. Managers from the appropriate departments are meeting weekly to discuss and implement joint behavior management plans for difficult multi-problem youth, including those on specialized units.

During the monitoring period, DMH Quality Integrity (QI) staff attended our exit meetings with DMH management and participated in the discussions of audit findings. The QI staff continues to work with our audit team to facilitate DMH staffs' efforts to move this paragraph into compliance.

PARAGRAPH 12: Implementation of the Treatment Plan

The County shall develop and implement policies, procedures, and practices for case management, which would allow for the implementation of the treatment plans and ensure that treatment planning follows each youth from facility to facility.

Current Compliance Rate: 67%

Comments:

Since the inception of the QI unit, DMH staff has improved their documentation of the minors' target symptoms. However, there are still inconsistencies in identifying the issues addressed in the service plan. For instance, DMH's treatment plan documented by the treating clinician was inconsistent with the problems, symptoms and behavior documented by the screening clinician during the Initial Assessment. DMH indicated that they are in the process of implementing a uniformed Treatment Plan for all the juvenile halls.

In March 2007, DMH implemented a more precise criterion for situations when the youth decline to have their families contacted or when the parents' telephones are disconnected. Since implementing the new procedures, DMH staff have demonstrated an improved effort to document their attempts to contact parents and guardians of the minors. The QI staff has also amended DMH treatment forms to accurately document service levels provided to minors.

PARAGRAPH 13: Counseling Services

The County shall develop and implement policies, procedures and practices to ensure the availability of sufficient and adequate counseling services that meet the goal of ameliorating target symptoms of identified mental illness.

Current Compliance Rate: A. Screen 1 - 65%, B. Screen 2 - 73%

Comments:

The Brief Symptom Inventory (BSI) is a standardized instrument that reflects subjective distress. The initial BSI is administered to a minor upon admission. A second BSI is

administered three weeks after the minor's admission to determine if there has been any improvement in their symptoms.

During February 2007, the DOJ set the compliance level for Paragraph 13 A (Screen 1) at 80%. In March 2007, DOJ agreed to set the compliance level for Paragraph 13 B (Screen 2) to 50%.

Screen 1 measures the adequacy of DMH staff's treatment contacts to the minor. Screen 2 measures improvements in the minors' symptoms when the results of the second BSI are compared to the first BSI.

During our November 2007 monitoring visit, we reviewed the documentation contained in 30 case files and noted the following compliance levels for Screen 1:

- 5 cases were rated at 100%
- 6 cases were between 80% and 90%
- 8 cases were rated between 60% and 70%
- 11 cases were rated at less than 60%

The case ratings were based on the level of documentation to identify the services provided to the minors. Case files rated at less than 100% did not maintain sufficient documentation of the services that DMH staff provided or their contacts with the minors.

During our November 2007 review of Screen 2, we reviewed 29 cases where a second BSI was administered. Twenty-one (73%) of the 29 cases reviewed showed improvement when the second BSI was compared to the first BSI. This reflects that all three juvenile halls have achieved the compliance level established for Screen 2, which is 50%.

PARAGRAPH 15: Individualized Behavior Modification

The County shall develop and implement individualized behavior modification programs for individual youth where appropriate. If warranted, LACOE will develop and implement Behavior Support Plans which will be incorporated into youths' Individual Learning Plans. If a special education pupil requires a Behavior Support Plan or Behavior Intervention Plan, the IEP team shall include this need in the IEP.

Current Compliance Rate: 95%

Comments:

The Monitor and DMH have not developed a specific audit tool for this paragraph. The Monitor and DMH believe that the Individualized Behavior Modification Planning (IBMP) process outlined in Paragraph 33 addresses the minors' needs related to this paragraph. The Monitor stated that the type of intervention addressed in this paragraph is rare.

DMH management stated that this paragraph does not lend itself to regular sampling and auditing. Probation and DMH established a process for youth whose needs can not be

met through the IBMP process. The IBMP committee will refer the youth for consideration by the Enhanced Supervision Unit (ESU) and for the Collaboration, Assessment, Rehabilitation and Evaluation (CARE) Units as appropriate. If none of these options meet the youth's needs, an individual behavior modification program will be developed by Probation and DMH specifically for the youth. In addition, the ESU provides an alternative treatment environment to meet the minors' needs.

IBMP and Interagency meetings are held weekly. In November 2007, we attended an IBMP meeting at Los Padornos Juvenile Hall to determine whether protocols and processes utilized at each facility are consistently applied. Based on our observations at the IBMP meetings, staff at all three facilities are conducting the meetings in a consistent manner. Committee members from LACOE, DMH, JCHS and Probation were present and participated in the discussions of the minors scheduled for review. Minutes to the meeting were taken and no problems were noted. We will continue to attend at least one meeting a month at one of the three juvenile halls.

PARAGRAPH 16: Substance Abuse

The County shall develop and implement policies, procedures, and practices to address substance use disorders appropriately.

Current Compliance Rate: 80%

Comments:

The compliance rate is based on our assessment of the initial screening process, the drug education program, and the follow up process. Generally, the screening process is sufficient. On a voluntary basis, California Drug Consultants, Alcoholics Anonymous, Vocation Outreach Chaplains and Narcotics Anonymous are providing treatment and counseling to the minors at the three juvenile halls. Central Juvenile Hall has one dedicated substance abuse counselor, who provides services to minors in the Enhanced Supervision Units, the CARE Units and the Special Handling Units. In addition, Probation's Life Enhancement and Assessment of Personal Skills (LEAPS) program has a Monitor-approved short-term substance abuse component that has been placed in use at all three juvenile halls.

DMH has amended the contracts of existing DMH contractors to add additional staff to provide the needed substance abuse services at the three juvenile halls pending the solicitation process completion and formal contracts are signed. Some DMH contractors have hired new staff and are providing services in the halls. Probation stated that this paragraph is anticipated to be placed in formal monitoring in February 2008 during the next Monitor's visit.

In addition, Probation management indicated that they are preparing a "Request For Proposal" (RFP) for a contract with service providers to provide substance abuse services at the juvenile halls. Probation and DMH have established a statement of work to define the services that are needed at the juvenile halls. Probation management indicates that

they will request bids from contractors in February 2008 and select a contractor and initiate a contract by August 2008.

PARAGRAPH 25: Management of Suicidal Youth

The County and LACOE shall develop and implement policies, procedures, and practices to ensure that mental health staff are sufficiently involved with probation and education staff in the management of youth exhibiting suicidal behaviors, including creation of individual behavior modification programs (County) and, if needed, creation for a youth of a Behavior Support Plan or a Behavior Intervention Plan (LACOE), and decisions about appropriate clothing, bedding, and housing (County).

Current Compliance Rate: 97%

Comments:

Probation staff provide adequate supervision of youth placed on Level III supervision. The Individual Behavior Management Plan (IBMP) committees reviewed and classified all the self-harm incidents that occurred during the period of our review. Probation issued a policy requiring building supervisors to promptly review and evaluate attempted suicides that occurred in their units. The policy also requires a tracking system that assigns a unique identifier to each incident to ensure that the incidents are properly reported and filed in a centralized location.

The total number of self-harming incidents that occurred at the three juvenile halls during October 2007 was 46. The number represents an 8% decrease compared to the 50 incidents that occurred in September 2007, and a 49% decrease compared to the 90 incidents that occurred in October 2006.

Each minor placed on Level III supervision must have an Enhanced Supervision Observation (ESO) form initiated for each shift and maintained during their assignment to Level III supervision status. Probation staff shall make entries on the form at four-hour intervals documenting the staff's observations of the minor's behavior.

During our November 2007 review, we reviewed the files of 26 minors on Level III supervision at the three juvenile halls. Of the 674 Enhanced Supervision Observation Forms (Forms) required, 631 (94%) Forms were in the files. The following is the breakdown of the compliance by juvenile hall:

- 591 (93%) of 634 sampled at Central Juvenile Hall.
- 38 (100%) of 38 sampled at Barry J. Nidorf Juvenile Hall.
- 2 (100%) 2 of sampled at Los Padrinos Juvenile Hall.

PARAGRAPH 26: Care for Self – Harming Youth

The County shall develop a continuum of services and responses to meet the needs of self-harming youth, including revised supervision practices to minimize incidents of self-harm and appropriate access to hospital services and specialized residential facilities.

Current Compliance Rate: 95%

Comments:

Each juvenile hall must maintain a Mental Health Psychiatric Hospital log used to track minors requiring a transfer to a higher level of care and a Transportation log documenting minors transferred to a higher level of care. Overall, each juvenile hall maintained a Mental Health Psychiatric Hospital log and the Transportation log.

When DMH refers a minor to a mental health facility, this paragraph requires the minor to be transported to the facility within two hours. Nine minors were referred to a mental health facility during the monitoring period. The transfers of the nine minors were appropriately recorded in the Transportation Log. However, Probation staff did not record the transportation times for two (22%) of the seven minors. According to Probation staff, not recording the transportation times was an oversight.

For the seven minors with recorded transportation times, all seven were transported to the facility within the mandatory two hour time frame.

PARAGRAPH 27: Staffing

The County shall provide sufficient staff supervision to keep residents reasonably safe from harm and allow rehabilitative activities to occur successfully.

Current Compliance Rate: 80%

Comments:

Probation management indicated that they follow the State's standard for staffing that requires one staff per ten minors for minors not under Level III supervision.

During November 2007, we conducted site visits to review the staffing levels within 28 living quarters. The staffing levels within the 28 living quarters (non-Level III supervision) ranged from one minor to one Probation staff to 19 minors to one Probation staff. The overall average equaled 12 minors to one Probation staff. In addition, the staffing levels for minors under Level III supervision at the 3 juvenile halls were one minor to one staff.

We also compared the number of Probation managers and staff assigned to the three juvenile halls since January 2006. Overall, the juvenile halls have not sustained a significant increase in staffing levels. The following table depicts the staffing levels at the juvenile halls from January through November 2007 compared to January 2006. The

positions include Supervising Detention Services Officer (SDSO), Senior Detention Services Officer (Sr. DSO), Detention Services Officer (DSO) and Night Shift Staff (GSN).

CENTRAL JUVENILE HALL												
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07
SDSO	20	17	17	17	16	14	21	23	23	23	23	24
SR DSO	44	64	62	62	62	63	54	56	57	58	58	58
DSO	272	327	302	297	292	261	282	290	283	302	292	283
GSN	73	80	107	111	71	106	81	82	83	84	84	85
Total	409	488	488	487	441	444	438	451	446	467	457	450

LOS PADRINOS JUVENILE HALL												
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07
SDSO	21	19	19	19	19	19	20	20	20	20	20	20
SR DSO	47	50	50	50	48	48	49	52	54	54	54	54
DSO	232	251	241	248	228	221	230	256	257	275	274	269
GSN	73	72	77	80	62	101	77	75	80	83	83	88
Total	373	392	387	397	357	389	376	403	411	432	431	431

BARRY J. NIDORF JUVENILE HALL												
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07	Sep-07	Oct-07	Nov-07
SDSO	23	23	23	23	21	17	21	21	19	21	21	21
SR DSO	60	51	51	51	49	51	51	51	57	54	55	54
DSO	229	261	255	132	282	265	261	261	259	262	262	255
GSN	77	65	71	73	64	74	75	75	86	91	91	94
Total	389	400	400	279	416	407	408	408	421	428	429	424

PARAGRAPH 28: Chemical Restraint

The county shall develop and implement policies, procedures, and practices to restrict the use of oleoresin capsicum (OC) spray to appropriate circumstances, enable supervisors to maintain appropriate controls over spray use and storage, restrict the carrying of OC spray to only those individuals who need to carry and use it, prevent whenever possible the use of OC spray on populations for whom its use is contraindicated or contrary to doctors' instructions, and ensure that decontamination occurs properly.

Current Compliance Rate: 95%

Comments:

Oleoresin capsicum, "pepper spray," is a pepper based non-lethal chemical restraint. Minors who are sprayed with OC spray are to be decontaminated by flushing the sprayed area with cold water. Probation developed policies governing the use of OC spray that conform to the above requirements.

During the month of October 2007, 11 separate incidents involving 21 minors were reported in which staff used OC spray on minors. One incident involving one minor occurred at Central Juvenile Hall, two incidents involving three minors occurred at Los Padrinos Juvenile Hall, and eight incidents involving 17 minors occurred at Barry J. Nidorf Juvenile Hall. According to the investigation reports, the use of OC spray in 10 of the 11 incidents was appropriate. The remaining one incident, involving one minor on psychotropic medication, was referred for investigation.

All of the minors were decontaminated and received the appropriate medical attention within 30 minutes of being sprayed with OC. Three of the 21 minors sprayed with OC were taking psychotropic medication. According to the investigation reports, the Probation staff involved in the OC sprayings were aware that the minors were taking psychotropic medication.

PARAGRAPH 29: Use of Force

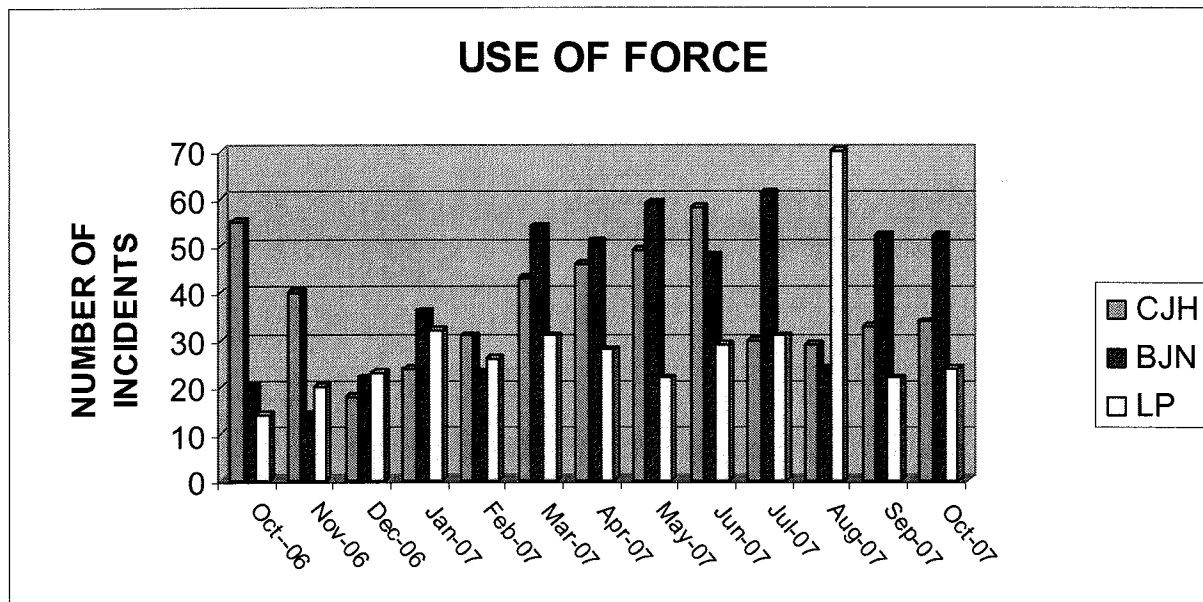
The County shall develop and implement a comprehensive policy and accompanying practices governing use of force, ensuring that the least amount of force necessary for the safety of staff, youth residents, and visitors is used on youth.

Current Compliance Rate: 95%

Comments:

The Probation Department trained its employees in "Safe Crisis Management," which emphasizes programming and de-escalation techniques. The training also included the proper use of physical and chemical restraints. It appeared that the training initially lowered the number of incidents in the use of force. From January 2006 to October 2006, 1,223 incidents in the use of force were reported. From January 2007 to October 2007,

1,152 incidents in the use of force were reported representing a 6% reduction from the previous year. However, as depicted in the chart below, the number of incidents involving the use of force over the last five months has gradually increased.



PARAGRAPH 31: Child Abuse Investigation

The County shall develop and implement a system for the timely, thorough, and independent investigation of alleged child abuse.

Current Compliance Rate: 85%

Comments:

Probation's Child Abuse Investigation Unit (SIU) consists of five full time investigators. Per the Los Angeles County DOJ action plan, Probation needs to complete 90% of their investigations of alleged child abuse within 30 days of the date the case was opened, and complete 95% of the child abuse investigations within 60 days of the date the case was opened.

Twenty-nine cases were opened during the months September and October 2007. The investigations for eight (28%) of the 29 cases were completed within 30 days of being opened. Twenty (95%) of the remaining 21 cases were completed within 60 days of being opened.

Probation staff members are required to maintain an activity log (Log) that lists when a Suspected Child Abuse Report (SCAR) was initiated and when the staff contacted law enforcement regarding the disposition of a criminal investigation. The Unit has amended the Log to include whether a SCAR has been generated, an investigation number linked to the SCAR, date of occurrence and the date the Unit was notified. The Probation director in

charge of the Unit has also agreed to require the investigators to sign in at the juvenile halls when they respond to an incident and to identify the case to which they are responding. The director of the Unit has implemented an on call "roll out" schedule giving the Unit around the clock response capability. In addition, the independent counsel, who will review all completed investigations, began receiving cases for review in August 2007.

The Monitor indicated that he will grant formal monitoring to this paragraph after Probation develops a data base to track child abuse cases and specific procedures addressing the Unit's response to reported alleged child abuse. The procedures also include the role of the independent counsel.

The Unit has developed an Excel data base to track child abuse cases in the halls and camps. The data base includes: the date the incident occurred, the date the Unit was notified of the incident, the date the Unit investigators responded to the scene of the incident, when and if a law enforcement agency was notified, the status and disposition of the investigation.

PARAGRAPH 32: Use of Force Review

The County shall develop and implement a system for review of uses of force and alleged child abuse by senior management so that they may use the information gathered to improve training and supervision of staff, guide staff discipline, and/or make policy or programmatic changes as needed.

Current Compliance Rate: 93%

Comments:

During the monitoring period, a total of 110 use of force incidents were reported in the three juvenile halls: 52 at Barry J. Nidorf Juvenile Hall, 24 at Los Padornos Juvenile Hall and 34 at Central Juvenile Hall. Of the 110 packets reviewed, 158 minors were involved in the use of force, 148 (94%) minors received medical treatment within 30 minutes of the use of force. Of the remaining 10 minors, five at Central Juvenile Hall and five minors at Barry J. Nidorf Juvenile Hall received medical treatment two hours beyond the required time frame.

Generally, Probation supervisory staff submitted a use of force incident report to management within 48 hours of the incident as required. For the 110 incident packets in use of force reviewed, 107 (97%) of the packets were completed within the 48 hour reporting timeline established by Probation. Of the remaining three reviews, two at Central Juvenile Hall were completed one and two days after the 48 hour timeline, one at Barry J. Nidorf Juvenile Hall was completed two days after the 48 hour timeline.

The Monitor indicated that Probation must have an administrative use of force policy in place before he grants formal monitoring to this paragraph. The policy must include procedures for use of force reviews, identification of minors on psychotropic medication, timeliness of medical treatment and submission of use of force investigations.

The Monitor also indicated that Probation must have an early intervention system in place. The early intervention system must include a policy, staff training and system implementation. Probation management issued a revised administrative use of force policy on August 28, 2007, which was approved by the Monitor. Probation management stated that they plan to issue the policy on Early Intervention during the month of January 2008. Probation management reassessed their progress on this paragraph and revised the anticipated formal monitoring date from November 2007 to April 2008.

PARAGRAPH 33: Rehabilitation and Behavioral Management

The County shall provide adequate rehabilitative programming and gender-specific programming, where appropriate. The County and LACOE shall provide a facility-wide behavioral management system that is implemented throughout the day, including school time.

Current Compliance Rate: 95%

Comments:

Individual Behavior Management Plan (IBMP) and Interagency meetings are held weekly. On November 6, 2007, we attended an IBMP meeting at Los Padrinos Juvenile Hall to determine whether protocols and processes utilized at each facility are consistently applied. Based on our observations at the IBMP meetings, staff at all three facilities are conducting the meetings in a consistent manner. Committee members from LACOE, DMH, JCHS and Probation were present and participated in the discussions of eighteen minors scheduled for review. Minutes to the meeting were taken and no problems were noted. We will continue to attend at least one meeting a month at one of the three juvenile halls.

On January 22, 2007, the Life Enhancement and Assessment of Personal Skills (LEAPS) program was implemented at all three juvenile halls. During our November review, we reviewed the documentation for nine LEAPS sessions at each of the three juvenile halls; all documentation was in order. We also interviewed 80 minors involved in LEAPS. Generally the minors stated that LEAPS was useful and assisted them in learning life skills. The children's incentive stores are in place at all three halls and the points system is fully implemented. All staff assigned to the juvenile halls have been trained in LEAPS.

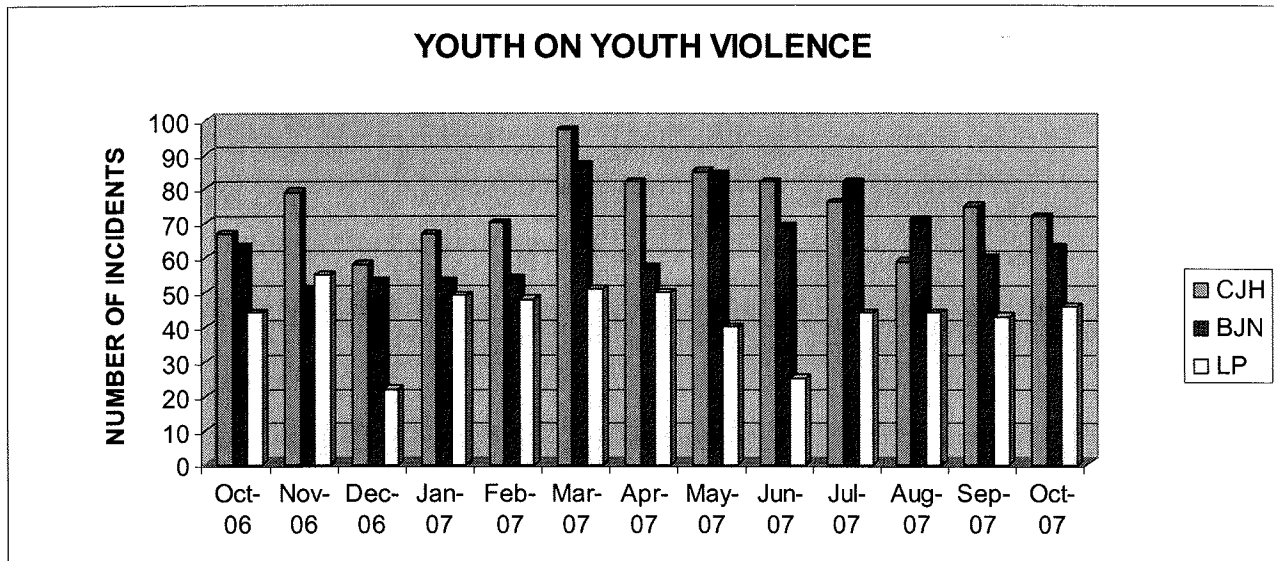
PARAGRAPH 35: Reduce Youth and Youth Violence

The County and LACOE shall develop and implement strategies for reducing youth on youth violence that includes training staff in appropriate behavior management, recognition and response to gang dynamics, and violence reduction techniques.

Current Compliance Rate: 85%

Comments:

Probation staff assigned to the juvenile halls received training in efforts to reduce youth on youth violence (YOYV). The number of incidents of YOYV in the three juvenile halls during October has increased by three incidents (2%) from the previous month. However, the number of incidents from January to October 2007 compared to January to October 2006 represents an 8% decrease in YOYV incidents in the three juvenile halls.

**PARAGRAPHS 46 to 50**

Paragraphs 46 through 50 are audited by LACOE's internal auditors under the supervision of LACOE management. On September 17, 2007, LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs as indicated below.

LACOE management stated they have been working closely with the Monitors and have reached a mutual understanding of the definition of substantial compliance. LACOE modified their audit tools to capture the information needed to document LACOE's progress toward substantial compliance.

PARAGRAPH 46: Special Education

The County and LACOE shall at all times, provide all youth confined at the Juvenile Halls with adequate special education in compliance with the Individuals with Disabilities Education Act (IDEA), 20 U.S.C. § 1400 et seq., regulations promulgated thereunder, and this Agreement.

LACOE is proceeding with this paragraph divided into five paragraphs as follows:

- 46.1 Special Education Upon Intake.

- 46.2 Staffing.
- 46.3 Screening for Special Education Needs.
- 46.4 Individual Education Programs.
- 46.5 Training and Quality Assurance.

The DOJ began formal monitoring for Paragraph 46.1 as of August 23, 2007.

Targeted Date to Request Formal Monitoring for 46.2-5: December 2007

PARAGRAPH 47: Related Services

LACOE shall provide related services to special education students with needs for these services.

Targeted Date to Request Formal Monitoring: December 2007

PARAGRAPH 48: Parent Participation

The County and LACOE shall utilize a range of methods to facilitate parent participation in Individualized Educational Program (IEP) meetings.

Targeted Date to Request Formal Monitoring: December 2007

PARAGRAPH 49: Transition Planning and Services

The County and LACOE shall provide adequate transition planning and services for all eligible youth with disabilities.

Targeted Date to Request Formal Monitoring: December 2007

PARAGRAPH 50: Materials, Space and Equipment

The County and LACOE shall ensure that all classes, including those held inside residential units, have appropriate materials, space and equipment.

In August 2007, the LACOE Project Manager requested formal monitoring for this paragraph retroactive to July 2007. The Monitor indicated that LACOE is in substantial compliance with most of the requirements of this paragraph. LACOE's Project Manager anticipates formal monitoring for this paragraph in January 2008.

Targeted Date to Request Formal Monitoring: January 2008

PARAGRAPH 55: Youth Hygiene

The County and LACOE shall ensure that youth have adequate hygiene opportunities, including sanitary personal hygiene products. The County shall ensure that youth have adequate linens, bedding and clothing.

Current Compliance Rate: 80%

Comments:

Paragraph 55 is audited by Probation's Management Services Bureau (MSB) auditors. We review MSB's audits on a monthly basis. The percentage of compliance is based on the MSB auditors' reports and our discussions with the Monitor.

We conducted walk-through inspections of the living quarters, supply rooms and laundry at all three juvenile halls. We interviewed Probation staff and inspected MSB's documentation related to inventories for clothing, hygiene items and cleaning supplies. Probation posted the established inventory levels in the supply rooms. The living quarters reviewed were in good condition and the laundries were clean. MSB's documentation at all three juvenile halls were in order. We compared the inventory levels to the established levels for inventory items in the stockrooms at the three juvenile halls. Generally the inventory levels met the established levels.

PARAGRAPH 56: System

The County and LACOE shall revise and/or institute quality assurance systems to ensure implementation of the provisions addressed in this Agreement.

Current Compliance Rate: 85%

Comments:

The County has established a quality assurance program for the three juvenile halls. Data is being gathered in a variety of areas. The Auditor-Controller's Quality Assurance Unit is completing periodic compliance audits at the juvenile halls and issuing monthly status reports to the Board of Supervisors.